



WIOA Title 1 Dislocated Worker (DW) – Enrollment Authorization

Applicant's Name: _____ ASSET PIN: _____

Enrollment Required Documents (in this order)	EMI Office Use Only
<input type="checkbox"/> 1.) WIOA Title 1 DW – Enrollment Authorization Form – Oct. 2024	
<input type="checkbox"/> 2.) Anti-Harassment Notice and Rights and Responsibilities Acknowledgement – Oct. 2024	
<input type="checkbox"/> 3.) TABE/CASAS Reading and Math Scores (if applicable)	
<input type="checkbox"/> 4.) Career Assessment Cover Sheet & Results– Aug. 2023	
<input type="checkbox"/> 5.) Individual Employment Plan Print Out (IEP from ASSET - Signed)	
<input type="checkbox"/> 6.) ESS-CEPT Printout (Signed by participant and career planner)	
<input type="checkbox"/> 7.) Participant Agreement Form (This is a subrecipient specific form)	

Database Requirements	EMI Office Use Only
<input type="checkbox"/> ASSET (Enrollment) <ul style="list-style-type: none"> <input type="checkbox"/> Assessments-Comprehensive Assessment <input type="checkbox"/> Assessments- Test Scores for TABE/CASAS (if applicable) <input type="checkbox"/> Assessments- Test Scores for Career Assessment <input type="checkbox"/> IEP Development/Manage Employability Plan or CEPT <input type="checkbox"/> Services- Initial and/or Comprehensive Assessment <input type="checkbox"/> Services- IEP Development <input type="checkbox"/> Customer note for Assessments provided (Dates need to align) <input type="checkbox"/> Customer note for IEP provided (Dates need to align) <input type="checkbox"/> Upload all documents into ASSET (Once approved by EMI Staff) 	
<p style="color: red;">* Create Service to Activate Participation Date in ASSET</p> <input type="checkbox"/> ETO - Participant Dismissed from Intake and entered into Enrolled Program	

Enrollment status: Approved Not approved: Reason: _____

(Submit Documents to EMI for review for Enrollment / Participation)

(Career Planner Signature) (Agency) (Date) (Manager Initial) (Date)

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(EMI Staff Signature) (Date)

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